

REMARKS/ARGUMENTS

Claims 1-21 were pending and were examined. The claims have been amended and canceled as noted above. Reexamination and reconsideration of the claims, as amended, are respectfully requested.

The objection to claim 1 has been overcome by amending the language to read "at a pre-determined distance proximal from the wall of the blood vessel." Antecedent basis for the blood vessel wall has been provided in line 1 of the claim.

Turning now to the substantive rejections, claims 1, 2, 5-8, 10, 12, and 13 were rejected as being anticipated by the Brenneman '495 application. Such rejection has been overcome as follows.

While Brenneman does disclose a balloon 42 which may be inflated over a puncture site 20 of the blood vessel wall, the balloon 42 and locator tube 30 are intended to be introduced through and used with a conventional vascular access sheath 12. In particular, it is necessary that the entire vascular access sheath be left in place and anchored to the skin in order to effect hemostasis, as generally shown in Fig. 1.

Method claim 1 in the present application, the only independent claim examined, has been amended to clearly distinguish the teachings of Brenneman. The amendments set forth the method as generally illustrated in Figs. 8A - 8F. The amendments incorporate the limitations previously found in dependent claim 12, and further clarify that the sheath through which the locating member is initially introduced is withdrawn while the locating member and compression member remain in place. Such method is not taught in the Brenneman '495 application and, indeed, would not be possible since the sheath 12 could not be withdrawn over the luer hub on locating member 30, as can be seen in Fig. 1.

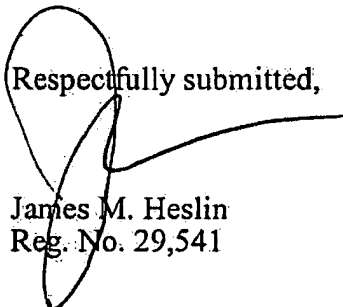
As now amended, claim 1 sets forth that both the locating member and the compression member are provided. The locating member is inserted through the tissue tract so that the expansible member on the locating member is located in a lumen of the blood vessel. The expansible member on the locating member is then expanded, and the member drawn proximally so that the expanded member covers the puncture site in the vessel wall. The sheath

is then removed while the locating member remains in place, and the compression member is advanced over the locating member without the need for the sheath to remain in place, as required in the Brenneman '495 application. An expansible member on the compression member is then expanded within the tissue tract at a distance proximal from the wall of the blood vessel and is then expanded to apply pressure against the subcutaneous tissue to promote hemostasis. While this hemostasis occurs, the large and bulky vascular access sheath has been removed providing significantly greater comfort and less risk to the patient.

CONCLUSION

In view of the above amendments and remarks, Applicants believe that independent claim 1 as well as all remaining claims dependent thereon are in condition for allowance and request that the application be passed to issue at an early date.

If for any reason the Examiner believes that a telephone conference would in any way expedite prosecution of the subject application, the Examiner is invited to telephone the undersigned at 650-326-2400.

Respectfully submitted,

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